

Julia Patterson, *Board of Health Chair*

BOH Members:

Sally Clark
Richard Conlin
George Counts
Reagan Dunn
Bob Ferguson
Ava Frisinger
Larry Gossett
David Hutchinson
Kathy Lambert
Frankie Manning
Bud Nicola
Tom Rasmussen
Pete von Reichbauer

Public Health Director:

Dorothy Teeter, Interim
Director & Health Officer

BOH Staff:

Kathleen Uhlorn

King County Board of Health
Friday, September 15, 2006
King County Council Chambers
MEETING PROCEEDINGS

Members Present: Sally Clark; Richard Conlin; Ava Frisinger; Larry Gossett; David Hutchinson; Kathy Lambert; Frankie Manning; Bud Nicola; Julia Patterson.; Pete von Reichbauer.

Members Absent: George Counts; Reagan Dunn; Tom Rasmussen; Bob Ferguson.

Staff: Dorothy Teeter; Kathy Uhlorn; Jane McKenzie

1. Call to Order

The meeting was called to order at 9:37 AM by Board Chair Patterson.

2. Announcement of Alternates

No alternates were present.

3. Approval of Minutes

The minutes for the July 14, 2006 and July 25, 2006 meetings were approved.

4. General Public Comments

None

5. Chair's Report

Board Chair Patterson introduced Mr. Paul Wickenden, Kent County Council, England, who was visiting to observe Board and Council proceedings.

Board Chair Patterson reported the following:

- The 20th Anniversary Lifelong AIDS Alliance Walk took place on September 9, 2006 and raised over \$775,000 for services and support for people in our community who are living with HIV and AIDS.
- On September 18, 2006, the King County Council will receive a briefing on a regional pandemic flu plan that includes planning and preparedness for all County departments. The Council will also consider a \$6 million appropriation to support pandemic flu preparedness activities.
- Six candidates were selected to interview for the position of Director of Public Health. Candidates were interviewed on September 8, 2006 by a panel that included Board members and representatives from different King County and City of Seattle departments, community clinics, and Harborview Medical Center.

- Throughout August and September 2006, King County staff members have engaged in the Live Well Challenge—a friendly competition between 178 King County staff teams. Teams track their healthy behaviors and receive points when members reach their personal goals for exercise and healthy nutrition. Chair Patterson’s team (The Five Feathered Freaks for Fitness) tied for first place after the first week of competition.

Carrie S. Cihak, Council Staff, reported on the King County Council motion to create a plan to address chronic homelessness and repeated crisis interventions for community members with mental illness and chemical dependencies. Ms. Cihak also summarized the proceedings of the Board retreat that took place on July 25, 2006 as recorded in the adopted meeting minutes.

6. Board Member Updates

Board Member Nicola reported on the Board’s restaurant inspection tour on July 14, 2006 (Boardmembers visited a restaurant with health inspectors to experience first-hand some of the complications posed in regulating food service establishments) and on the Highpoint Neighborhood tour on August 30, 2006 (Boardmembers visited newly constructed homes specially built to reduce the impact of asthma—the only project of its kind in the country).

Board Member Frisinger reported that the Cities of Lake Forest Park and Issaquah participated in a Pan-Flu Roundtable on August 23, 2006.

Board Member Conlin reported on the City of Seattle’s success in establishing Alcohol Impact Areas (AIA) in Seattle’s Central Core and University District neighborhoods. Board Member Lambert suggested that White Center may be a good area to target next.

Board Member Lambert reported that October is Domestic Violence Awareness month and on October 20th, the King County Council will consider a resolution which would encourage health care providers to routinely screen for domestic violence.

7. Director’s Report

Dorothy Teeter, Interim Director, reported:

- On September 13, the State of Washington had its first confirmed case of human infection from the West Nile Virus.
- The FDA recalled all bagged spinach from across the country because of *E. coli* outbreaks. The advice at this time is to not eat any bagged spinach purchased from the grocery store.
- The Seattle & King County Annual Tuberculosis (TB) Report for 2005 is now available. There is continued improvement in Public Health’s TB control activities.
- The smoking rate in King County declined from 23% in 2000 to 13.3% in 2005.
- Dr. Bob Wood, Director of HIV/AIDS Control Program, has been awarded the 2006 Scribner Courage in Health Care Award. He will receive that award on October 4, 2006.

8. Administrator’s Report

Kathy Uhlorn, Board Administrator, updated the Board on follow-up items from prior meetings.

Matias Valenzuela, Public Education Coordinator, played the Public Health public service announcement—one component of the intensive efforts in pandemic flu preparedness. The

“Stop Germs, Stay Healthy” campaign will be launched the week of September 18th and includes posters and radio announcements in multiple languages played in a variety of venues, including the airport and movie theaters. The public service announcement was played for the Board.

9. Health Code Merger Process

Kathy Uhlorn, Board Administrator, briefed the Board on the Health Code Merger process. Before 1995 the City of Seattle and King County both had their own Health Codes. State legislative action in July 1995 required one health code for each county, and as a result there has been an effort to consolidate the King County and City of Seattle health codes. 28 items were identified in the Seattle Municipal Code that comprised the Seattle Health Code. These items were transmitted to the King County Board of Health for inclusion in the King County Board of Health Code. Rule and Regulation #06-02 and #06-03 will be addressed at a future Board meeting. Rule and Regulation # 06-02 would eliminate five of the remaining items because they are obsolete. #06-03 would identify those Seattle Health Code items previously addressed by the Board, and re-adopt and ratify the Code of the Board of Health to include those items still in effect (though they may be addressed at a later date).

10. Public Health Operational Master Plan (PHOMP) Update

Toni Rezab, PHOMP Project Manager, reviewed the steps in the PHOMP process. Ms. Rezab discussed the Draft PHOMP Policy Framework, as accepted by the PHOMP Steering Committee for stakeholder input and feedback. The purpose of the draft policy framework is:

- To provide a set of principles to guide policy, strategies and actions that will improve the health of King County residents;
- To identify factors which determine what investments should be made in public health; and
- To describe the essential responsibilities of Public Health.

The Draft Framework sets forth a draft of King County's Mission for the Health of the Public: King County Government, through its Executive, County Council, Board of Health and health department, identifies and promotes conditions under which all people live within healthy communities and can achieve optimum health.

In addition to the mission, it also provides a set of draft Guiding Principles:

- Create equity in health
- Invest in prevention and health promotion
- Pursue excellence and innovation
- Be prepared
- Measure community health
- Form partnerships
- Engage all County departments
- Assure access to health care
- Assure sustainable infrastructure

The Draft Framework proposes the following factors in prioritizing Public Health investments:

- Consistency with King County's mission for the health of the public and Guiding Principles
- Consideration of need and evidence
- System considerations
- Resource considerations

The Draft Framework can be found on the Public Health OMP site at:
www.metrokc.gov/exec/publichealthmasterplan/

An electronic survey related to the OMP draft policy framework was distributed to approximately 750 stakeholders/partners of Public Health and will be sent out to all Public Health employees through the Director's Office. The survey asks participants to provide feedback by October 6th to assist the steering committee as they come to a final accepted framework.

11. Human Papilloma Virus (HPV)

Drs. Jeff Duchin and Matthew Golden briefed the Board on Human Papilloma Virus (HPV), the new HPV vaccine, and the associated public health issues. Human Papilloma Virus is a common sexually transmitted virus. There are more than 100 strains of HPV, 30 of which cause genital infections. Types 16 and 18 cause 70% of cervical cancer and types 6 and 11 cause 90% of genital warts. An HPV vaccine was recently approved by the FDA and is safe and nearly 100% effective in preventing cancer and genital warts caused by these four strains of HPV. The direct costs of HPV are estimated at about \$4 billion a year—90% results from abnormal PAP tests and treatment of pre-cancerous lesions and cervical cancer.

In June 2006, the Centers for Disease Control's Advisory Committee on Immunization Practices recommended routine HPV vaccination for girls 9 to 12 years of age and for women and female adolescents 13 to 26 years of age.

- The vaccine needs to be administered in three doses – at 0, 2 and 6 months.
- It is not a live virus vaccine so it does not cause any infection.
- It is highly effective in preventing a persistent HPV infection, cervical cancer, and precursor lesions.
- It is not known to benefit people already infected.
- In order for the vaccine to be most effective, it should be given before the infection occurs, i.e. before the onset of sexual activity, or early after the onset of sexual activity.

Pending state funding, in summer 2007 the vaccine will be available for girls under age 19 through Washington's universal vaccine program. At \$360 per vaccination, it is estimated that this will cost \$8 million per year in the first year. The State Board of Health, which has the authority to mandate immunizations through RCW and WAC, would likely wait two years (2009) to determine if the vaccine should be mandated for all girls (though parents could still elect not to have their children immunized for medical, religious, or philosophical reasons).

12. Emergency Medical Services (EMS)

Thomas Hearne, Ph.D, Division Director for the Emergency Medical Services (EMS) Division briefed the Board on the Emergency Medical Services/Medic One (EMS/M1) system's function and funding. The Medic One system was originally developed in Seattle in the early 1970's. This unique model was effective and simple, and has since been duplicated across the entire County.

In 1979, the first EMS levy was passed to support the EMS/M1 system. In 2005, the system served about 162,000 patients or approximately 9% of the County's population. The current response system includes five dispatch centers that handle calls County-wide, 32 fire

